## City of Falls Church FFORDABLE DWELLING UNIT (ADU) PROGRAM Consent and Release Form Housing and Human Services Division



Date

\* 300 Park Avenue, Suite W-100, Falls Church, Virginia 22046 \*\*Tel 703-248-5005, TTY 711, Fax: 703-248-5149, Website: <a href="www.fallschurchva.gov">www.fallschurchva.gov</a>

Your signature on this Affordable Dwelling Unit (ADU) Program Consent and Release form authorizes the above-named organization to obtain information from a third party relative to your eligibility for participation in the ADU program. (Printed full name of consenting person) \_\_\_\_\_\_ , authorize the Housing and Human Services Division for the City of Falls Church to obtain information about me and my household that is pertinent to eligibility for participation in the ADU Program. Client's Address State City Zip Code (Client's SSN - Optional (Client's Birth Date) Inquiries may be made about items mentioned below: Other Information (write in): Yes No Assessment Information I want: **Financial Information** Benefits/Services Needed Planned, and/or Received This information to be exchanged ONLY for the following purpose(s): Eligibility Determination Other (Write in): This Consent is Good Until: I acknowledge that (1) a photocopy of this form is as valid as the original, (2) I have the right to know what information about me has been shared, and shy, when, and with whom it was shared, (3) If I do not sign this form, information will not be shared and I will have to contact each agency individually to give them information about me that they need.

Information furnished to the City of Falls Church Housing and Human Services Division will be maintained and disseminated for governmental purposes in accordance with the Virginia Freedom of Information Act, Code of Virginia, Section 2.1.340 through 346.1 as amended, and the Privacy Protection Act of 1976, Code of Virginia Sections, 2.1-377 through 386, as amended. Please allow seven (7) working days for preparation of materials.

Signature

The City of Falls Church does not discriminate on the basis of disability in its employment practices or in the admission to, access to, or operations of its services, programs, or activities. Letha Flippin, 300 Park Avenue, Falls Church, Virginia 22046 has been designated to coordinate compliance with the ADA non-discrimination requirement.